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**DATE:** December 3, 2001

**TO:** Examiner Yaritza Guadalupe

**FROM:** Michele Yoder

**FAX NO.:** 703-308-7722

**NO. OF PAGES:** 22 (including this page)

**COMMENTS:** RE: US patent application for:  
Optical Sight  
Serial Number 09/520,087  
Our Docket Number SG 99428

Dear Ms. Guadalupe:

Attached with this facsimile is a copy of the Amendment, Amendment Transmittal, the postcard receipt and the checks submitted to the USPTO on October 25, 2001. Also attached herewith is an information disclosure statement and a PTO Form 1449. Copies of the references cited thereon were submitted to the USPTO on October 25, 2001. As these references are quite lengthy, copies are not being sent by facsimile. However, if you are unable to obtain copies of them, please let me know and I will forward new copies to you.

If you have any questions, please feel free to contact me. I will look forward to hearing from you.

Sincerely,

*Michele K. Yoder*  
Michele K. Yoder

\*\*\*\*\*  
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DOCKET NO. SG 99428

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: SCOTT, Valerie Anne et al.

Serial No.: 09/520,087 Group No.: 2859

Filed: March 7, 2000 Examiner: Guadalupe, Y.

For: OPTICAL SIGHT

Director of Patents  
Washington, D.C. 20231

## AMENDMENT TRANSMITTAL

1. Transmitted herewith is an Amendment for this application.

## STATUS

2. Applicant is

a small entity -- verified statement:

attached.

already filed.

other than a small entity.

## CERTIFICATE OF MAILING (37 CFR 1.8a)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Sysette Flaherty  
(Type or print name of person mailing paper)

Sysette Flaherty  
(Signature of person mailing paper)

Date: October 25, 2001

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(Amendment Transmittal [9-18]-page 1 of 4)

## EXTENSION OF TIME

NOTE: "Extension of Time In Patent Cases (Supplemental Amendments)—If a timely and complete response has been filed after a Non Final Office Action, an extension of time is not required to permit filing and/or entry of an additional amendment after expiration of the shortened statutory period.

If a timely response has been filed after a Final Office Action, an extension of time is required to permit filing and/or entry of a Notice of Appeal or filing and/or entry of an additional amendment after expiration of the shortened statutory period unless the timely filed response placed the application in condition for allowance. Of course, if a Notice of Appeal has been filed within the shortened statutory period, the period has ceased to run." Notice of December 10, 1985 (1061 O.G. 34,35).

NOTE: See 37 CFR 1.645 for extensions of time in interference proceedings and 37 CFR 1.550(c) for extensions of time in reexamination proceedings.

3. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply

(complete (a) or (b) as applicable)

(a) [ ] Applicant petitions for an extension of time under 37 CFR 1.17(a) for the total number of months checked below:

	Extension (months)	Fee for other than small entity	Fee for small entity
[ ]	one month	\$110.00	\$ 55.00
[ ]	two months	\$400.00	\$200.00
[X]	three months	\$920.00	\$460.00

Fee \$920.00

If an additional extension of time is required please consider this a petition therefor.

(check and complete the next item, if applicable)

[ ] An extension for \_\_\_\_ months has already been secured and the fee paid therefor of \$\_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$\_\_\_\_\_

OR

(b) [ ] Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

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## FEE FOR CLAIMS

4. The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY			OTHER THAN A SMALL ENTITY	
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDN. FEE	OR	RATE	ADDN. FEE
		0	x 9=	\$		x 18=	\$
TOTAL ♦ 12	MINUS ♦♦ 20	-					
INDEP. ♦ 1	MINUS ♦♦♦ 3	-	x 42=	\$		x 84=	\$
<u>FIRST PRESENTATION OF MULTIPLE DEP. CLAIM</u>				+140=	\$	+280=	\$
				TOTAL	\$	OR	TOTAL \$

ADDN. FEE \$ 0

- ♦ If the entry in Col. 1 is less than entry in Col. 2 write "0" in Col. 3.
- ♦♦ If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- ♦♦♦ If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- ♦♦♦♦ If the "Highest No. Previously Paid For" (Total or Indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

(complete (a) or (b) as applicable)

(a)  No additional fee for claims is required.

OR

(b)  Total additional fee for claims required \$ \_\_\_\_\_

## FEE PAYMENT

5.  Attached is check no. 5447 in the sum of \$920.00 to cover the Extension of Time Fee.

Charge Account No. \_\_\_\_\_ the sum of \$ \_\_\_\_\_

## FEE DEFICIENCY

**NOTE:** If there is a fee deficiency and there is non authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, 1065 O.G. 31-33.

6.  If any additional extension and/or fee is required, charge Account No. \_\_\_\_\_

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(Amendment Transmittal [9-19]-page 3 of 4)

## AND/OR

If any additional fee for claims is required, charge Account No. \_\_\_\_\_



Michele K. Yoder  
SIGNATURE OF AGENT

Michele K. Yoder  
Type or print name of Agent

Registration No.: 41,562

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